



January 22, 2013

Ms. Grissel V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region II
290 Broadway, 19th Floor
New York, NY 10007-1866

**Re: December 2012 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site**

Dear Ms. Diaz-Cotto:


Please find enclosed the December 2012 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit One at the Kin-Buc Landfill Superfund Site.

Weston & Sampson Services, Inc. would like to confirm the following:

- Effluent parameters sampled throughout the rest of December 2012 were within permitted limits.

Should you have any questions concerning this DMR or the Treatment Plant, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,
Weston & Sampson Services, Inc., on behalf of SCA Services, Inc.


Glenn Grieb/
Plant Manager
Enclosure

Cc: Martha Goodwin – NJDEP
Stephen Joyce – SC Holdings, Inc.
Carl Januszkiewicz – SC Holdings, Inc.
John A. Bocchino, Jr. – Weston & Sampson Services, Inc.

307558



Connecticut	Rhode Island	New Hampshire	Maine	Vermont	New York	Florida
273 Dividend Road Rocky Hill, CT 06067	477B Tiogue Avenue Coventry, RI 02816	100 International Drive Suite 152 Portsmouth, NH 03801	PO Box 189 York, ME 03909	96 South Main Street Suite 2 Waterbury, VT 05676	301 Manchester Road Suite 201A Poughkeepsie, NY 12603	1990 Main Street Suite 750 Sarasota, FL 34236

When it's essential...it's Weston&Sampson®

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDDES NO.

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 *NJ Permit Equivalent

REPORTING PERIOD

M o. Y r.	M o. Y r.
1 2 1 2	1 2 1 2

PERMITTEE: Name: SCA Services, Inc.
 Address: 383 Meadow Road
 Edison, New Jersey 08817

FACILITY: Name: Kin-Buc Landfill
 Address: 383 Meadow Road
 Edison, New Jersey 08817
 Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY
 ___ T-VWX-007 ___ T-VWX-008 ___ T-VWX-009
 ___ EPA Form 3320-1

YES NO
 DYE TESTING ___ X

SLUDGE REPORT-INDUSTRIAL
 ___ T-VWX-010A ___ T-VWX-010B

TEMPORARY BYPASSING ___ X

DISINFECTION INTERRUPTION ___ X

WASTEWATER REPORTS
 ___ T-VWX-011 ___ T-VWX-012 ___ T-VWX-013

MONITORING MALFUNCTIONS ___ X

UNITS OF OPERATION ___ X

GROUNDWATER REPORTS
 ___ T-VWX-015(A,B) ___ T-VWX-016 ___ T-VWX-017
 ___ ELECTRONIC SUBMISSION

OTHER ___ X

NPDES DISCHARGE MONITORING
1 EPA Form 3320-1

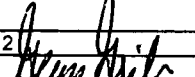
(Detail any "Yes" on reverse side in appropriate space.)

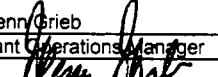
NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Glenn Grieb
 Grade & Registry No. N-4 ; 0021212
 Signature 

Name (Printed) Glenn Grieb
 Title (Printed) Plant Operations Manager
 Signature 

Date January 16, 2012

[illegible]

1	2
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1	2
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Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
0	2	8	0	4	8	10	0	2	9	10	8	0	9	0	2
4	0	4	4	8	8	14	4	0	4	8	8	8	8	4	0
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
8	8	8	4	0	0	4	0	0	8	8	8	0	4	9	
4	8	12	8	8	4	0	4	0	8	8	8	4	0	8	

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

FACILITY

LOCATION

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
12	12	01	12	12	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
FLOW	SAMPLE MEASUREMENT	0.021840	0.035155	MGD	*****	*****	*****	***	***		continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****				continuous	flow meter
pH	SAMPLE MEASUREMENT	*****	*****	***	8.21	*****	8.49	S.U.	0		1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0				weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	0.82	0.9	mg/l	0		2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15				2/month	grab
COD	SAMPLE MEASUREMENT	21.53	23.20	kg/day	*****	177	177	mg/l	0		2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY				2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<1.35	<1.40	mg/l	0		2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	36	220				2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.47	1.12	kg/day	*****	4.15	10.00	mg/l	0		1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)				weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	7.43	*****	*****	mg/l	0		1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN Instantaneous	*****	*****				weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				TELEPHONE		DATE				
Glenn Grieb Project Manager						732 572-4743		13 01 16				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY		
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										

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LOCATION
ATTN:

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383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT PERMIT NUMBER			001 DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
12	12	01	12	12	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BENZENE	SAMPLE MEASUREMENT	<0.0000098	<0.0000105	kg/day	*****	<0.08	<0.08	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.009	0.02		*****	57	134			2/month	grab
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.0000134	<0.0000145	kg/day	*****	<0.11	<0.11	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000159	<0.0000171	kg/day	*****	<0.13	<0.13	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.003	0.009		*****	22	58			2/month	grab
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000122	<0.0000132	kg/day	*****	<0.10	<0.10	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000122	<0.0000132	kg/day	*****	<0.10	<0.10	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.008	0.025		*****	52	184			2/month	grab
TOLUENE	SAMPLE MEASUREMENT	<0.0000183	<0.0000198	kg/day	*****	<0.15	<0.15	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000159	<0.0000171	kg/day	*****	<0.13	<0.13	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.009		*****	26	60			2/month	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				732 572-4743		13 01 16			
Glenn Grieb Project Manager											
TYPED OR PRINTED											
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		YEAR MO DAY	

PERMITTEE NAME/ADDRESS
NAME
ADDRESS

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383 MEADOW ROAD
EDISON, NEW JERSEY 08817


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ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT		001	
PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD			
YEAR	MO	DAY	TO
12	12	01	12 12 31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000110	<0.0000119	kg/day	*****	<0.09	<0.09	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	26	69			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000161	<0.0000185	kg/day	*****	<0.14	<0.14	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.016		*****	92.8	106			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000043	<0.0000046	kg/day	*****	<0.036	<0.036	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0000055	<0.0000059	kg/day	*****	<0.05	<0.05	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000074	<0.0000079	kg/day	*****	<0.060	<0.061	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000122	<0.0000132	kg/day	*****	<0.100	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.0000054	<0.0000058	kg/day	*****	<0.044	<0.044	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab

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Glenn Grieb Project Manager			732 572-4743	13 01 16					
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY		
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS	(REFERENCE ALL ATTACHMENTS HERE) <0.00017	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
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NJ PERMIT EQUIVALENT			001		
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12	12	01			12 12 31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000232	<0.0000250	kg/day	*****	<0.190	<0.190	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0001740	<0.0003549	kg/day	*****	1.6	3.2	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.0000013	<0.0000013	kg/day	*****	<0.011	<0.011	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0675	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.0000014	<0.0000015	kg/day	*****	<0.012	<0.014	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.36	0.766			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.0000200	<0.0000211	kg/day	*****	<0.18	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.0000259	<0.0000277	kg/day	*****	<0.23	<0.26	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.0000160	<0.0000171	kg/day	*****	<0.14	<0.16	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years) (REFERENCE ALL ATTACHMENTS HERE)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		13 01 16		
TYPED OR PRINTED							AREA CODE NUMBER		YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

PERMITTEE NAME/ADDRESS
NAME
ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY
LOCATION
ATTN:


KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
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YEAR MO DAY TO YEAR MO DAY
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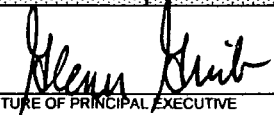
PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PCB-1260	SAMPLE MEASUREMENT	<0.0000148	<0.0000158	kg/day	*****	<0.13	<0.15	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab	
ARSENIC	SAMPLE MEASUREMENT	0.0006460	0.0007386	kg/day	*****	5.70	7.30	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.013	0.028		*****	85.8	172			weekly	comp	
CADMIUM	SAMPLE MEASUREMENT	<0.0001022	<0.0001173	kg/day	*****	0.9	0.9	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp	
CHROMIUM	SAMPLE MEASUREMENT	0.0005055	0.0005801	kg/day	*****	4.40	4.40	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.030	0.060		*****	198	356			weekly	comp	
COPPER	SAMPLE MEASUREMENT	0.0008023	0.0008965	kg/day	*****	7.0	7.9	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp	
LEAD	SAMPLE MEASUREMENT	0.0002973	0.0003298	kg/day	*****	2.80	2.90	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp	
NICKEL	SAMPLE MEASUREMENT	0.0040445	0.0044823	kg/day	*****	35.3	36.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.140	0.281		*****	924	1850			weekly	comp	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)						TELEPHONE		DATE		
Glenn Grieb Project Manager								732	572-4743	13	01	16
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										

PERMITTEE NAME/ADDRESS
NAME SCA SERVICES, INC.
ADDRESS 383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY KIN-BUC LANDFILL
LOCATION EDISON, NEW JERSEY
ATTN: CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC	SAMPLE MEASUREMENT	0.0007154	0.0007568	kg/day	*****	6.3	7.5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.177	0.353		*****	1170	2350			weekly	comp
CYANIDE	SAMPLE MEASUREMENT	<0.0004661	<0.0005537	kg/day	*****	4.1	4.2	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	26.4			weekly	comp
ALUMINUM	SAMPLE MEASUREMENT	0.0261286	0.0369128	kg/day	*****	225.0	280.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	1.40	2.81		*****	9240	11560			weekly	comp
IRON	SAMPLE MEASUREMENT	0.0110749	0.0145014	kg/day	*****	95.5	110.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	90.6	162		*****	532000	1070000			weekly	comp
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	***	n/a	*****	*****	%	0		
	PERMIT REQUIREMENT	*****	*****	*****	50(3)	*****	*****			see permit	equivalent
Ammonia	SAMPLE MEASUREMENT	*****	*****	***	*****	0.16	0.200	mg/l	0	*****	*****
	PERMIT REQUIREMENT	*****	*****	*****	*****	4.9	10.0			2/month	comp
	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***	***	*****	*****
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			*****	*****
NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)						TELEPHONE		DATE	
Glenn Grieb Project Manager								732 572-4743		13 01 16	
TYPED OR PRINTED								AREA CODE NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)